



Privacy Act Release

Please mail completed form to:
Congressman Sean Duffy
15954 Rivers Edge Drive Suite 206
Hayward, WI 54843

Or email to:
Jim.Miller@mail.house.gov

Congressman Sean Duffy and his staff have my permission to obtain any information from my records to assist me in the matter described on the reverse.

Signature: (b) (6)

Contact Information:

Name: (Please Print) (b) (6)

Mailing Address: K & A Mfg., Inc. dba RightAngle Products, 6703 Zinser Street

City, State, Zip: Schofield, WI 54476

E-Mail Address: (b) (6)

Telephone: (b) (6)

List any or all identifying numbers that might apply to your concerns:

Date of Birth: _____

Social Security Number: _____

Federal Agency Involved: GSA, K & A GSA Contract # GS-28F-0035M -Cert. Sm. Business

Case Number: (VA Claim #, Immigration "A" #, Military ID #, Passport #, Medicare #)

Do you currently have a case pending with the involved agency in regard to this matter?

☐ Yes ☒ No Description: _____

Do you have any representation other than Congressman Duffy in regard to this matter?

(b) (6)

